

Massachusetts Department of Environmental Protection Bureau of Resource Protection - Drinking Water Program

Chlorite/Chlorine Dioxide Report

(3 Sample Set)

| PWS ID # | | | | | | |
|-------------------|--|--|--|--|--|--|
| Lab Sample ID - A | | | | | | |
| Lab Sample ID - B | | | | | | |

Lab Sample ID - C

A. PWS Information

| | A | . Pws information | 1 | | | | | |
|---|----|--|------------------------------|-----------|-----------|-------------------|----------------------|--|
| Important: When filling out forms on the | 1. | Facility - Please refer to your DEP Water Quality Sampling Schedule to help complete this section: | | | | | | |
| computer, use only the tab key to move your | | PWS ID # | | City/Town | | | | |
| cursor - do not use the return | | PWS Name | | | PWS Class | s: 🗌 COM | ☐ NTNC ☐ TNC | |
| key. | A. | DED Course Code// code// | Commission Commission | | Data | T: 1 | Callagtad by | |
| W | | DEP Source Code/Location II | Sample Location | | Date | Time ¹ | Collected by | |
| | B. | DEP Source Code/Location II | Sample Location | | Date | Time ¹ | Collected by | |
| stare 🔨 | C. | DEP Source Code/Location II | Sample Location | | Date | Time ¹ | Collected by | |
| | | Notes | | | | | | |
| ¹ Chlorine Dioxide sample sets where the | | | | | | | | |
| same location is being sampled three times shall | В | . Laboratory Anal | ytical Information | 1 | | | | |
| be collected at six hour intervals. | | Analyzed by | | | | | Lab Certification # | |
| | | Subcontracted: | Subcontractor Laboratory Nam | e | | | Sub. Certification # | |
| ² TNC Systems are NOT required | | Natas | | | | | | |
| to monitor for Chlorite. | | Notes | | | Б | | | |
| Onionie. | | | А | | В | | С | |
| | | Compound ² | | | | | | |
| | | Result mg/L | | | | | | |
| ³ Chlorite analysis requires the use of a Massachusetts or EPA certified laboratory for the 3 sample sets. | | Chlorite MCL (mg/L) | 1.0 | 1.0 | | 1.0 | | |
| | | Chlorine Dioxide MRDL (mg/L) | 0.8 | 0.8 | | 0.8 | | |
| | | Analytical Method | | | | | | |
| | | Detection Limit mg/L | | | | | | |
| Attention: Mail TWO copies of this report to your | | Date Analyzed | | | | | | |
| DEP Regional Office within 30 days of receipt of | | Lab Sample ID# | | | | | | |
| result and no later than 10 Primary Certified Operator or Laboratory Director Signature ³ Date | | | | | | | | |

days after the end of the reporting period.



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(3 Sample Set)

1.

2.

Lab Sample ID - A

Lab Sample ID - B

Lab Sample ID - C

C. DBPR Compliance Reporting

The MCL is violated if the average of any three sample set exceeds 1.0 mg/L.

The MCL is violated if (1) Acute - a daily sample exceeds 0.8 mg/L and any one of the three sample set on the following day exceeds 0.8 mg/L, (2) Nonacute two consecutive daily samples exceed 0.8 mg/L and none of the three sample set on the second day exceed 0.8 mg/L

| Chlorite: | | | | | | |
|--|--------------------------------------|--|--|--|--|--|
| Average Result mg/L (A + B + C) / 3 | | | | | | |
| Number of Chlorite MCL Violations this month | | | | | | |
| Chlorine Dioxide: | | | | | | |
| Yes ☐ No ☐ Acute Chlorine Dioxide MRDL Violation | | | | | | |
| Yes ☐ No ☐ Nonacute Chlorine Dioxide MRDL Violation | | | | | | |
| I certify under penalty of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete | Primary Certified Operator Signature | | | | | |
| to the best of my knowledge and belief. | Date | | | | | |

For DEP Use Only -Please initial and date as completed: Accepted:

Comments:

Disapproved:

Data entered into WQTS: